

Questions the Associate Should Ask the Doctor

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At a recent seminar, some new members to the acupuncture profession shared with me accounts of their experiences at past offices where they had worked. Some accounts were very factual, while others communicated humorous experiences from practice. Most stories centered around a misunderstanding between the desires of the associate and the doctor in the practice relationship. Whether these misunderstandings give us a laugh or not, the job runs smoother when these are kept to a minimum.

Before entering into a business relationship with the doctor, you should ask questions to help identify areas of confusion and any unattainable vision for either party regarding the practice. A note of caution to the new associate: if the doctor is vague with these answers or does not give specific job descriptions (e.g., "We are a growing practice and you must be flexible"), don't accept the position. No matter how attractive the possibilities are or how many promises are made about developing a practice, do not do it. If the job description is not written down so the exact duties and responsibilities are known, janitorial duties like cleaning the office toilet may not be far off -- and verbal job descriptions do not hold up in court.

The following questions should help you cover the basics.

I. Financial Matters

- A) Do they offer a base salary and/or percentage?
 - 1. If so, for how much?
 - 2. For how long?
 - 3. Is the percentage based on the practice's collections or the associate's own collections?
 - 4. Is the percentage based on the gross or the net income?
- B) Will taxes be taken out of the checks (salary or percentage)?
- C) Will there be compensation for treating on overtime, vacation time, emergency calls, etc.?
- D) What is the office's fee schedule? Will the associate have the ability to establish their own fee schedule with patients?
- E) What will the financial responsibilities be for overhead (employee salaries, advertising, rent, equipment upkeep/repair, etc.)?
- F) If the patient requires vitamin supplements, supports, braces, etc., what percentage of these sales will the associate receive?

G) Who does the billing for the associate's services, the front office or the associate?

1. If the billing is done through the front office, will the associate's billing be given equal priority even though the billing amount is less?

II. Employment/Job Matters

A) Will the associate be an employee, a partner, or an independent contractor? If the associate is an independent contractor, employment can be terminated at any time. An independent contractor is not eligible for workers' compensation through the doctor's office. The independent contractor is responsible for their own taxes, health insurance, etc.

B) If the associate will be an employee, what is the length of the probationary period be? How soon can a partnership can be established?

C) What are the associate's expectations? Do they match the job description (written by the doctor) regarding examinations, treatments, front office billing, etc.?

D) Will the associate have the liberty to practice the way he/she desires (e.g., point selection, herbs, exercises, schedule, ancillary methods)?

E) What will the associate's hours be?

1. How many hours will the associate have available to treat patients?
2. Will the associate be asked to move his/her patients from a room to accommodate the doctor?
3. Will the associate be asked to treat the doctor's patients?
4. Will the associate be allowed to treat patients during hours when the office is usually closed?

III. Office Matters

A) Will advertising be changed to include the new associate?

1. If so, how?
2. Who will pay for the associate's business cards?
3. Does the office have a set format for business cards which the associate must follow?
4. Will the associate be included in the present letterhead or be responsible for their own?

B) Are the telephones answered by the clinic's name or the doctor's name? Will that be changed to include the new associate's name?

C) Will the associate have access to front office files, billings and collection information?

D) Will the associate receive keys to the office?

IV. Miscellaneous Matters

- A) Who will pay for attending seminars? Will the time spent at seminars be paid time off?
- B) Who will pay for malpractice premiums? How much coverage is required, and does it have to be with the same carrier?
- C) If the associate leaves or moves, how should a termination notice be handled (e.g., two weeks notice)?
 - 1. If the associate leaves or moves to another local practice, will there be any clauses that prevent the associate from "taking" their patients and files? (Check your laws regarding this point. Even if the associate signs a contract that is contrary to law, the law supersedes all others.)
 - 2. If the associate leaves or moves from the area, would the current doctor buy the associate's current practice?
- D) What days/holidays is the clinic closed?
- E) How does the associate arrange for time off or vacation time?
- F) If both the doctor and associate want to vacation at the same time, what arrangements will be made for the patients?
- G) If the associate treats the vacationing doctor's patients, what percentage of collections does the associate receive?

V. Protecting Yourself

- A) The associates should make a copy of their paycheck. This has all the necessary information if the associate has to attach a lien to the doctor's account for wages not paid.
- B) If the associate has a dispute about past wages, etc., take the case to small claims court. Many books are written about this inexpensive way to solve such disputes.
- C) If the associate is unlawfully terminated, consult an attorney.
- D) The associate can save time and money by having the employment contract read by an attorney who specializes in this area. If the doctor does not allow the contract to leave the office or to have the associate's attorney read it, do not work for this doctor.

VI. The Interview

- A) Prospective associate doctors should consider themselves an asset to the practice. Associates that assumes many of the head doctor's duties free up the doctor to pursue other interests for the sake of the patient and

practice.

B) Keep in mind that the doctor is not a professional interviewer and may not cover all the areas listed here. There may also be other areas of concern you. This does not mean the doctor is incompetent; they are simply not a professional interviewer.

C) Associates should be realistic about their clinical, interpersonal and managerial skills. Keep this in mind when discussing financial aspects of the associate's salary and terms.

D) During the interview, do not be afraid to ask questions. Take a few days or weeks to think about offers and counteroffers.

The points in this article are designed to be a starting point for discussion between the doctor and associate so that most aspects of the working relationship are covered beforehand. The more clear everyone is in the relationship, the more it will benefit the doctor, the associate, and most importantly, the patient.

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